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CONFIRMATION NO. 8976

<b>SERIAL NUMBER</b> 10/531,964	<b>FILING OR 371(c) DATE</b> 12/07/2005 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1637	<b>ATTORNEY DOCKET NO.</b> 59802(49947)
<b>APPLICANTS</b> David L. Keefe, Tampa, FL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/32672 * which claims benefit of 60/419,071 10/16/2002 and claims benefit of 60/452,741 03/07/2003 (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b> <div style="text-align: center;"><b>** SMALL ENTITY **</b></div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 49
				<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> 21874				
<b>TITLE</b> Methods of assessing the risk of reproductive failure by measuring telomere length				
<b>FILING FEE RECEIVED</b> 1590	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	